

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Th	omas Currier		
•	nership, firm or corporation, if	any:	
N/A			
•	urtnership, firm or corporation)		
54 Cotton Road	Deerfield		03037
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) <u>463-8324</u>	()(Fa:	e-mail thomas.cui	rrier@pharma.com
(Telephone)	(Faz	x)	
	(Choose one – file separate repo		aay file a separate report for
reportable expense transac	tions which are not attributable	e to any one client).	
All reportable transaction	s occurring in the months prior to	the reporting date relative to t	the following client:
Purdue Pharma LP	,	, 5	<i>5</i>
	Name of Client as it appears on the L	ohhvist Registration Form)	
<u>OR</u>	Name of Chent as it appears on the L	coodyist registration rolling	
	s by the lobbyist (including the lo	bbyist's family), or the lobbyir	ng firm listed below which are
unrelated to any particular cli	ent.		
		7.1.04.001F	
	ii 26, 2017	July 26, 2017 ☐ activity from 4/1/17 to 6/30/17	
= : =	ober 25, 2017	January 31, 2018	,
	from 7/1/17 to 9/30/17	activity from 10/1/17 to 12/3	1/17
	es received and no reportable te just this form and submit it to t		
VI. Check if additional repo	orts are attached:		
	or made expenditures, you must	file Addendum A- Fees and I	Expenses
☐ If you have paid an hono Expense Reimbursement	rarium or reimbursed expenses, y	ou must file Addendum B – R	eport of Honorariums or
☐ If you, your firm, or you	r family has made political contri	butions, you must file Addend	um C- Political Contributions
and complete to the best of n	B, RSA 14-C and RSA 664 and	hereby swear or affirm that the	1
(Signature of lobbyist)		(Di	,
Thomas Currier		,	RECEIVE
(Print Name of lobbyist)			

OCT 1 3 2017